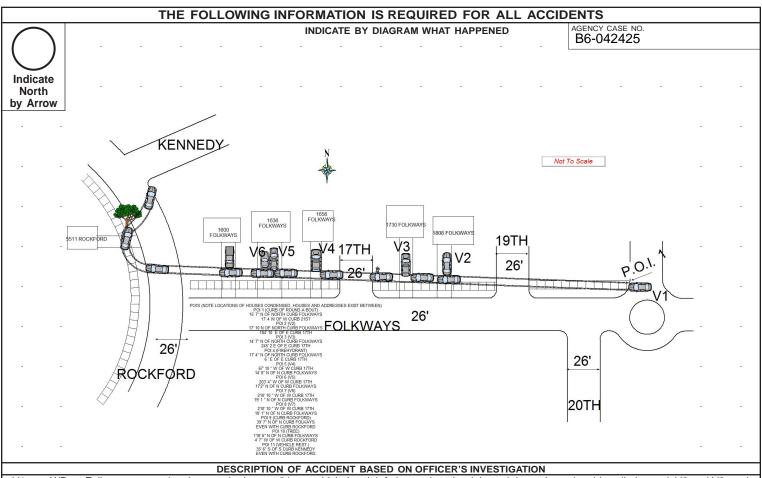
21601 98774			State of Ne Investic		Motor Ve	ehic	le Ac	cide	nt Re	eport	(	Shee	<sub>t</sub> 1	of _	9	_
7	Total Num of Vehicl	ibei	Local No./ District 131		Agency Case No. B6-04242	5			HIT & RU			YES	$\circ$	T SCENE?	? L 1	
A/1 01 A/2	OF ACCIDENT	05/15	5/2016			W TH	F S	TIME OF ACCIDENT POLICE NOTIFIED	1300	litary Time)	STATE USE	ONLY				
В	OF ACCIDENT	CITY	 Lincoln						PRIVATE	YES NO		/201	6			
68 c				o. <b>21ST</b> F	OLKWAYS TO	ROCK	FORD/	KENNE	ONE-WAY	YES NO	LATITUDE					
1			FEET	N	S E W OF MILEPOST	Г		HIGHWA	Y NO.		LONGITUD	E				
2	MUI TIPI					FEET $\subset$				IEAREST STREET	Γ, BRIDGE,	RAILF	ROAD C	ROSSING	3	
V1/M 16 V2/M	MILES		N S E	ACCIDENT W	/AS OUTSIDE CITY LI	MITS, IN	W OF N	EAREST	FROM NEA	REST TOWN						
01 E 1	R. WORK ZONE CODES	R1	R2 R3 R4	CLASS	IFICATION			S5-b S6	6-a S6-b	STATE DEPT.	OF ROAD	S' PR				
F	DRIVER		G02192	2213	V	EHICLE	E NO. 1			STATE	NE	SF			_	
1 V1/N	DRIVER							PHONE 402-4	77-5139	(Of License)			<u> </u>	MALE		
1 V2/N			STON ST AF	PT 1, LINC	CITY, STATE, ZIP	8		1		DATE OF BIRTH (MM / DD / YYYY)	08/19	1/194	19		V1/1	_
1	OWNER TIMOTH	Y NIE	EDERHAUS					PHONE 402-4	77-5139	- 1		).			V1/2	_
<sup>G</sup> 2			STON #1. L	INCOLN.	CITY, STATE, ZIP				CITATION	ING X NO	CITATION	NO.			19	
н 4			IO. TSK323									(Of Pla	ate)	NE	19	
V1/O	VEHICLE	1		Ford		3			tan	2			E		19	
4 V2/O	NO. (VIN)	1FA	FP52S4WG	6144934	TOWED BY				STA	TE FARM					V1/5 - 19	
1		Γ			CAPITAL TOW		- 110 0				27A				V1/6	٦
1	DRIVER		10		v	EHICLE	: NO. 2			STATE		SE	· X			۷
V1/P	DRIVER		10.					PHONE		(Or License)	LOCAL NO	).		MALE	1.00	
4 V2/P					CITY, STATE, ZIP					DATE OF BIRTH					18	
8	OWNER STEVEN	w w	ROUGHTON	N-W-M-5-1	19-57			PHONE	90-5933	[(MM / DD / YYYY		).			V2/2	
<sup>J</sup> 01	OWNER ADDRES	SS			CITY, STATE, ZIP			102 0	CITATION	YES NO	CITATION	NO.			V2/3	_
V1/Q	LICENSE PLATE F		ıo. TWG148					1 '				(Of Pla	ate)	NE	V2/4	_
V2/Q	VEHICLE	YEAR	2009	Pontiac	G/5				silve	r / chrome 🤇				)	V2/5	
3 K	VEHICLE ID NO. (VIN)	1G2	AS18H997	141088					SHE	LTER INS.					18	_
13	TOWED TO				TOWED BY										V2/6	
	С	omp (Com	lete this se	ection for on report, if m	all injured pe	rsons jured)	;				Seat Position	<b>2</b> Eject	3 Body Region	Injury Sev Tr	se SE	X
VEH. #	DARLENE	NIED		25 FOLKW					03/04/1	929	03	1	04		2 F	
1	LOCAL NO.		MEDICAL FACILITY I BryanLGH Me	NAME dical Center	West (Lincoln Genera	1)			cue		EMS RUI	√ REPC	ORT NO.			
VEH. #	NAME			ADI	DRESS	-1										
	LOCAL NO.		MEDICAL FACILITY	NAME		EMS S	ERVICE NAME				EMS RUI	N REPO	DRT NO.			_
VEH. #	Comparison   Com														_	
	LOCAL NO.		MEDICAL FACILITY I	NAME		EMS S	ERVICE NAME				EMS RUI	N REPC	DRT NO.			_



V1 was WB on Folkways, traversing the round-a-bout at 21st at which time it left the road on the right and drove down the sidewalk. It struck V2 and V3, and continued to hit the fire hydrant at 17th/ Folkways NE corner. V1 continued WB along the sidewalk and struck V4, then V5 which was pushed into V6. Still WB V1 hit V7 and swerved as it was crossing Rockford drive turning to the right. The vehicle swerved over the W curb of Rockford and as it came back to Rockford NB it hit and sheared off a tree about 6 inches in diameter in front of 5511 Rockford. The vehicle crossed the street and came to a stop after hitting the curb on the E side of Rockford. Witness had observed the start of the incident as V1 had exited the round-a-bout and headed W down the sidewalk. D1 was not sure where he was and didn't seem to know what happened. Ofc. determined from medical bracelet that he has epilepsy. LFR did check the party out. Passenger and Injured party ...

PROPERTY	OBJE FIF			YDRANT	CITY OF	LINCOL	N 555 S	19TH, L	INCOLN, NE 6850	8 PHONE			\$ 1200		DAMAGE
PROP	OBJE RL			ND DAMAC	OWNER NAME ROBERT I S	KOLNICK-	W/M/11-1-55	ADDRESS 5 1626 FC	DLKWAYS, LINCOLN, NE	68521 PHONE 402-326-640	01		\$ 500	OST OF	DAMAGE
SSE		NC	AL	D MAHRT-W	V/M/05-02-	1954 184	47 FOLKV	ADDRESS NAYS,	S LINCOLN, NE 6852	1		PHONE 402	= 2-742-7	7450	
WITNE	NAME	Ē						ADDRESS	6			PHONE	=		
VEI	. E	BEF	ORI	E MOVEMENT E COLLISION ROAD OR		MOST DAM	MPACT AND AGED AREA	١	AIRBAG DEPLOYED VEHICLE 1	RESTRAINT USE VEHICLE 1	ОССИ	TAL JPANT	rs VEH	3	VEH 0
NO 1	N	SE	+	HIGHWAY NAME FOLKWAYS	- '	er numbers	for each veh  VEHIC	,	1 -	2	ALCC TEST		Driver No. 1	Drive No. 2	trian
2	X		<u> </u> ^	DRIVEWAY	DOINT OF	02	POINT OF IMPACT	02	1 Deployed - front	1 None used - vehicle occupan 2 Lap & shoulder belt used	t ALCO	/EL	Y N X	Y N X	Y
1	0	1		06 Turning left	MOST DAMAGED AREA	11	MOST DAMAGED AREA	05	2 Deployed - side 3 Deployed - both front/side	3 Shoulder belt only used 4 Lap belt only used	BAC L	EVEL		Driver	Driver
2	1	0		07 Making U-turr 08 Entering traffic lane	00 None	0		04	4 Not deployed 5 Not applicable/ No airbag available	5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet used 8 Costume helmet used		LCOH DRUG SPEC	S	No. 1	No. 2
02 03 04	Essei straig Backi Chan Overt Passi Turnii	ght ai ing nging taking ing	head lane g/	09 Leaving I traffic lane 10 Parked es 11 Slowing or stopped in tra 12 Other 13 Unknown	09 Top & v 10 Underca 11 Total (a 12 Other	windows _ arriage <b>01</b>		05	6 Unknown  VEHICLE 2	9 Restraint use unknown  VEHICLE 2	1 Ne 2 Yes 3 Yes 4 Yes	either al s - alcol s - drug	Icohol nor hol suspect gs suspect hol & drug	cted ed	,
	1CER				TROOP/ TEAM/ BEAT 7			Lince	oln Police Departmer	nt			otograp en?		YES NO
1				AME (Print or Type)  ger				roved by	ATURE y Officer Jesse Hilge	r	DATE REPO		05/1	6/20°	16

		6019 <i>1</i> 774	63		State of Management		Motor	Vehic	le A	ccider	nt Co	nti	inuati	on Re	pc	ort s	Sheet	3	of	9	
					Local No./ District 131	<u>,                                      </u>			Agency						<u> </u>				E USE O	NLY	_
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<sup>N</sup>	ŀ	OWNER WAD	)F J F	RANK-	W/M/12-2	8-70					PHONE 402-5	560-	-6988	(MM / DD / YY		LOCAL NO	).			2.	
° 2	1	OWNER A	ADDRES	S	S, LINCOL		CITY, ST	ATE, ZIP				1 -	TATION	⊖YES	3	CITATION I	NO.			3.	
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3	1	0	06 Tu	urning left	DAMAGED AREA	04	DAMAGED AREA	04	3 Dep 4 Not	oloyed - both deployed	front/side	15 (	Lap belt onl Child safety			BAC LE		Driv	er No.	Driver	No.
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ا ا	esse	Hill	er					Appro	ved by	Officer	Jesse	⊓iiger				REPORT	05/	10/201	U

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143		NAME (Prins	t or Tuno		TEAM/ BEAT 7		l IA	IVESTIGATO	Linco		e Depa	artment	:						
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stra 02 Bac	ight king	ahead	tra 10 Pa	iffic lane irked	09 Top & 10 Under		7	05		VEHICLE _8		VEHI	CLE <u>8</u>		either alc es - alcoh			suspected
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Jesse	e Hilg	jer				'	Approv	ed by	Officer	Jesse I	Hilger				DATE OF REPORT	05/	16/201	6

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ROA	D ON W	HICH ACCIDE			STREET	ACCI			ncoln ST FOL	KWAY	S TO F	ROCKF	ORD/ I	KENN	IEDY			
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	or NAME Hilge	(Print or Type)	•				estigator :		<sup>URE</sup> Officer J	esse F	Hilger				DATE OF ACCIDENT	05/	16/2016	